

AUG 17 2005

PTO/SB/21 (09-04)

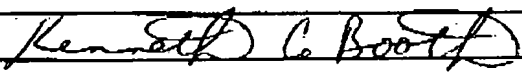
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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/077,512
	Filing Date	02/15/2002
	First Named Inventor	Thomas W. Booth
	Art Unit	2193
	Examiner Name	Roche, Trenton J.
	Attorney Docket Number	BOOT-0522
Total Number of Pages in This Submission		2

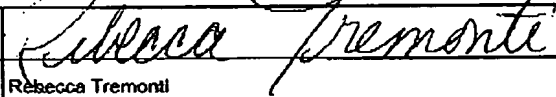
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Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Booth Udall, PLC		
Signature			
Printed name	Kenneth C. Booth		
Date	08/17/2005	Reg. No.	42,342

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REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS	Application Number	10/077,512
	Filing Date	02/15/2002
	First Named Inventor	Thomas W. Booth
	Art Unit	2193
	Examiner Name	Rodho, Trenton J.
	Attorney Docket Number	BOOTH-0522

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

54434

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number:

54434

OR

<input type="checkbox"/> Firm or Individual Name			
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Country			
Telephone	Email		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Thomas W. Booth</i>		
Name	Thomas W. Booth		
Date	08/15/2005	Telephone	801-982-1747

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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